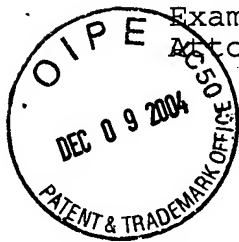


**FEE TRANSMITTAL**

Application Number 10/665,965  
Filing Date September 18, 2004  
Inventor(s) John Tadich  
Examiner Name Flemming Saether  
Attorney Docket Number MLP 7222

Art Unit 3677  
Confirmation No. 8329



[ ] Applicant claims small entity status.

**METHOD OF PAYMENT**

[ ] The Commissioner is hereby authorized to charge the indicated fees to Deposit Account No. 19-1345. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

[X] Check Enclosed. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

**FEE CALCULATION**

1. [ ] BASIC FILING, SEARCH AND EXAMINATION FEES  
(Type: \_\_\_\_\_) Subtotal (1) \$ \_\_\_\_\_

2. [X] EXCESS CLAIM FEES

Total Claims 22 - 20 (HP) = 2 x Fee 50.00 = \$ 100.00  
Indep Claims 3 - 3 (HP) = 0 x Fee 200.00 = \$ 0  
Multiple Dependent Claims Fee \$ 0  
(HP = highest number of claims paid for)

Subtotal (2) \$ 100.00

3. [ ] APPLICATION SIZE FEE

Total Pages \_\_\_\_\_ - 100 = \_\_\_\_\_ ÷ 50 = \_\_\_\_\_ x \$250 = \$ \_\_\_\_\_  
(Application + Drawings) (round up to whole #)

Subtotal (3) \$ \_\_\_\_\_

4. [ ] OTHER FEE(S)

[ ] \_\_\_\_\_ month extension of time  
[ ] Information disclosure statement  
[ ] 37 CFR 1.17(q) processing fee  
[ ] Non-English specification  
[ ] Notice of Appeal  
[ ] Filing a brief in support of appeal  
[ ] Request for oral hearing  
[ ] Other: \_\_\_\_\_

Subtotal (4) \$ \_\_\_\_\_

**TOTAL AMOUNT OF PAYMENT** \$ 100.00

*Kurt F. James*  
Kurt F. James, Reg. No. 33,716  
Telephone: 314-231-5400

December 9, 2004

Date

KFJ:JHC/mlt  
Express Mail Label No. EV 504796892 US